Winona Police Department City of Winona, Mississippi 38967

ARREST REPORT

Phone (601) 283-1121

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NO		•	(000	,		ŧ	NO			
NAME OF PERSON ARRESTED		.,			ALIAS OR NICKNAME	(S) ARRES	DATE 5	,		
1						25-04	- 9.8 AM AM			
Willie J. Hemps	nel Occupation					05-04 TIME	□ AM Ş	<u> </u>		
21 1.000	· Ki	Por at	. 1		MA INFORMATION TYPE	183	, 2 -PM			
36 Sierce J.		virus	DRIVER'S	LICENSE I	NFORMATION TYPE		PIRES	<u> </u>		
	STATE	NA	CENSE NO	MBEK		[^	TRES	ž		
AGE RÁCE SEX EYES	HAIR HEI	GHT WEIGHT	DATE OF	BIRTH	PLACE OF BIRTH	TA	TTOOES OF	R ID. MARKS		
27 B m B2	BUK 5	9/40	9.10	-7/						
WHERE ARRESTED		12-7-02		HOW ARR	EST MADE: ON	VIEW D	CALL WARRANT			
S. Front St.				WARRANT	NO.	WA	RRANT DAT	TE		
OFFENSE(S) SUSPECTED OR CHARGE	5									
no Univers Lee	·enie									
DATE OFFENSE COMMITTED	TIME		П а.м.	COURT						
S-4-98 WHERE OFFENSE COMMITTED	1830		LIPM		4					
		TYPI	E PREMISE	ES	7		ВІ	USINESS TRADE NAME		
ARMED YES ON										
ARMED YES)					LL ITEMS V				
TYPE WEAPON					C DRINKING C					
PREVIOUS ARRESTS .				OTHER P	ERSONS ARRESTED	FOR SAME	OFFENSE			
igis										
1 - 1	MODEL	STYLE	COLOR	LICE	NSE # A -364	STATE		MPOUNDED DYES & NO		
INVOLVED 88 fort		2 Mr.	Rd	<u> </u>	A-364	ms	199 V	VHERE		
PROPERTY PLACED IN PROPERTY ROC	M						•			
										
NAME OF COMPLAINANT	,			RELATION	OF COMPLAINANT	& SUSPECT	- IF ANY?			
ADDRESS OF COMPLAINANT	upt_			L						
ADDRESS OF COMPLAINANT	,					BEST PH	ONE	OTHER PHONE		
				l.aa la						
WITNESSES NAME.	BEST	CONTACT ADD	KESS	AGE BE	EST PHONE	OTHER F	HONE	PARENT OR GUARDIAN?		
1 de Vanton										
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NOTE FACTS OF ARREST NOT INCLUDE	ED ABOVE									
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ARRESTEE'S RIGHTS GIVEN BY		DA.	TE	TIME	PLACE					
RESULTS OF INVESTIGATION					to the test the test that the test the test that the test that the test the test that the test the test that the test			NCIC #		
ARRESTING OFFICERS		REPORT MA	DE BY			FINAL DIS	POSITION			
W-2-W-9 Bank	an Belle	Varito	5		<u> </u>					
	/ Hen suga	10-00-10-0	t for additi		ation not covered above					

AT THE FOLLOWING LOCATION.	LOW, THE AFFIA	NT HEREIN, BE				OES DEPOSE AM	VD SAY
STATE OF MISSISSIPE COUNTY OF		ACENON	CODE				
City of Wi			03	2Nº	0	0578	33
LOCATION +	(t		DISTRICT		HIGH	WAY / STREET	_
DAY	DATE		10	TIME		ACCIDENT	?
NAME (FIRST NAME, MIDDLE NAME	ME LAST NAME	集. 9	8	18:	فعة	□ YES	ZHO"
Wille	5 2/a	mel	ill				
ADDRESS	`	1					
CITY PILET	STAT	<u> </u>	<u> </u>	Ži	P CODE		
Kelmedy	1 n	75			39	747	
DRIVER LICENSE NUMB			CLASS	STATE	SEX	RACE DATE OF	_
VEHICLE LICENSE NUMBER	STATE	YEAR MA	KF	MODEL	M	VEHICLE TYPE	2-11
6-XA-364	m	100	Port			rC	
THAT THE AFORESAID PERSON MISSISSIPPI WILLFULLY OPERA	ON DID UNLAWF	ULLY AND AG	AINST THE F	PEACE AND	DIGNI	Y OF THE ST	ATE OF
	CODE (CHECI			ON EAC	ч тіск	ET)	
		ONE	S81-Seatb				
☐ SP3-Speeding			RR4-No Dri	iver License	: (Expire		
☐ SC2-Ran Stop Sign/Red Li ☐ WW2-Driving on Wrong Sid			☐ RT-No Moto		spection	n: (Expired)	
☐ VR2-Driving While License			☐ VA2-Driving	_	nse Sus	spended	
☐ FO1-Following Too Closely			Under t	mplied Cons			
☐ PA1-Improper Passing ☐ RW2-Failed To Yield Right (of Way		□ RK1 ·Reckle □ NH·Tint Lav	-			
OTHER VIOLATION: (Cite sp		ion violated and	d explain the	violation bel	ow)(Offense	Code)
RK 4	NO	カム					
☐ Violation pursuant to Commo ☐ Required placard under Haza	rcial Driver's Lice	ense Law	Act				
			nyli		70.0	-1.151.5	DOES
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(See Instructions Below)	RETURN TO (1) IM MO Palie Dest.						
FORFENDANT'S NAME: LAST FIRST MIDDLE	RACE SEX AGE DATE OF BIRTH						
ARREST FILE NUMBER OFFENSE DATE, OFFENSE	NUMBER WARRANT NUMBER CAPIAS NUMBER						
05-04-98 CHARG	ES FILED:						
1 An Arivers licence							
2							
2.							
PROSECUTOR: City Attorney County Attorney District Attorney	ttorney CAUSE NUMBER: M98-Q01597						
PLEA: Nolo Contendere Not Guilty Guilty TRIAL RESULT: Not Guilty Guilty Dismissed	NAME OF COURT: Ligaria Paleir Court JUDGE (MAGISTRATE) Davold Band						
CHARGES: SAME AS	ABOVE REDUCED TO:						
1.							
2.							
3.							
DISPOSITION(s) (If more than one, indicate for which charge.)							
NO BILLED	\$Fine and \$Costs						
CASE PRESENTED - PROSECUTION REFUSED	Day(s) County Jail and \$ & Costs						
DISMISSED AT TIME OF EXAMINING TRIAL Month(s) County Jail & \$ & Co.							
DISMISSED BY STATE'S MOTION	Month(s) Probation						
SENTENCED TOYEARS IN (NAME OF	Year(s) Probation						
INSTITUTION) AND / OR \$FINE	Month(s) Probation & \$ & Costs						
CONCURRENT WITH OTHER	Month(s) and Sentence Suspended						
CONSECUTIVE WITH OTHER	Year(s) and Sentence Suspended						
REMARKS: plead guilty							
DISPOSITION DATE: SIGNATURE OF PE	ERSON WRITING DISPOSITION						
	RUCTIONS ss a disposition is shown for an arrest and for the charge, then that arrest						
OFFICER who files charges and prepares the necessary follow up report w upper portion is ESSENTIAL. It MUST be completed in detail.	vIII PREPARE A DISPOSITION SHEET. The information requested in the						
OFFICER delivering the Offense Report and any Supplement Reports to the included with the reports.	e Prosecutor will make certain that a completed Disposition Sheet is						
PROSECUTOR, for REASONS stated in paragraph one, is URGED to complete their portion of the form immediately after Court Disposition.							